INVENTOR INFORMATION

Inventor One Given Name:: Kevin T
Family Name:: Stone
Postal Address Line One:: 2615 Harmony Court
City:: Winona Lake
State or Province:: IN
Country:: United States
Postal or Zip Code:: 46590
City of Residence:: Winona Lake
State or Province of Residence:: IN
Country of Residence:: United States
Citizenship Country:: United States

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 27572
Fax One:: (248) 641-0270

APPLICATION INFORMATION

Title Line One:: SHOULDER IMPLANT ASSEMBLY
Total Drawing Sheets:: 11
Formal Drawings?:: Yes
Application Type:: Utility
Docket Number:: 5490-000346
Secrecy Order in Parent Appl.?:: No

REPRESENTATIVE INFORMATION

Representative Customer Number:: 27572

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